

**FILED**  
12/26/2023 E.C.  
THOMAS G. BRUTON  
CLERK, U.S. DISTRICT COURT

**UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF ILLINOIS**

Shukeitha Jackson )

Plaintiff )

v. )

AbbVie )

Defendant )

**Case Number:** 23-CV-3747

**Judge:** Rowland

**Magistrate Judge:** Cummings

Attached is a Motion For Attorney Representation



[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

- ☒ I have previously filed an Application for Leave to Proceed In Forma Pauperis in this case, and it is still true and correct.
- ☐ I have previously filed an Application for Leave to Proceed In Forma Pauperis in this case. However, my financial status has changed and I have attached an Amended Application to Proceed In Forma Pauperis to reflect my current financial status.
5. ☒ I declare that my highest level of education is (check one):
- ☐ Grammar school      ☐ Some high school      ☒ High school graduate  
☒ Some college      ☐ College graduate      ☐ Post-graduate
6. ☐ I declare that my ability to speak, write, and/or read English is limited because English is not my primary language. (Check only if applicable.)
7. ☐ I declare that this form and/or other documents in this case were prepared with the help of an attorney from the U.S. District Court Pro Se Assistance Program. (Check only if applicable.)
8. ☒ I declare under penalty of perjury that the foregoing is true and correct.

Signature of Movant

523 Helmholtz Ave.

Street Address

12/21/2023

Date

Waukegan, IL. 60085

City, State, Zip

Other cases in which an attorney requested by this Court has represented me:

Case Name: _____	Case No.: _____
Attorney's Name: _____ This case is still pending <input type="checkbox"/> Yes <input type="checkbox"/> No	
The appointment was limited to settlement assistance: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Case Name: _____	Case No.: _____
Attorney's Name: _____ This case is still pending <input type="checkbox"/> Yes <input type="checkbox"/> No	
The appointment was limited to settlement assistance: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Case Name: _____	Case No.: _____
Attorney's Name: _____ This case is still pending <input type="checkbox"/> Yes <input type="checkbox"/> No	
The appointment was limited to settlement assistance: <input type="checkbox"/> Yes <input type="checkbox"/> No	